

Purchase Order Receipt Listing

Page 1 of 1

Wednesday, July 25, 2012 3:02:13 PM

All amounts are calculated in domestic currency.

All Vendors PO ID PO17485 Receipt Dates from 7/25/2012 to 7/25/2012 All Line Item Types
All Item ID/GL/WOs All Rec. Employees All Currencies
Grouped by Vendor ID

Purchase Order ID/ Curr Type	Line Nbr/ Insp Req	Project ID	Reference/ Description/ Cert Std	PO U/M / Stock U/M	Required Date Required Qty	Recv Date/ Recv Emp	Recv Qty (PO U/M)	Cost Per Unit/ Recv Value	Inspected Qty/ Rejected Qty (PO U/M)	MRB Qty/ MRB Reject Qty	Book Amt
VendorID\Vendor Name		VU-COR001	C.O.R.E. Aviation Services								
PO17485	4		AN4C46A	Each	7/24/2012	7/25/2012	100.0000	\$22.95	0.0000	0	\$2,295.00
USD	No		BOLT	Each	100.0000	DESJ02		\$2,295.00	0.0000	0	
			122519								
	9		AN5C35A	Each	7/24/2012	7/25/2012	30.0000	\$8.50	0.0000	0	\$255.00
	No		Bolt	Each	30.0000	DESJ02		\$255.00	0.0000	0	
			122519								
	11		AN8C21A	Each	7/24/2012	7/25/2012	25.0000	\$24.50	0.0000	0	\$612.50
	No		BOLT	Each	25.0000	DESJ02		\$612.50	0.0000	0	
			122519								
Total Received Quantity:											155.0000
Total Qty to Inspect (PO U/M):											0.0000
Total Reject Quantity:											0.0000
Total Receipt Value:											\$3,162.50
Total Balance Due Quantity:											0.0000

Receiving Report

Date: 12/7/20
 Supplier: AVIALU

Batch No: 1122019
 Dart P/O: 17488

Packing Slip: Yes ☒ No ☐
 Invoice: Yes ☐ No ☒
 Receipt: Cash ☐ Cr ☒

Release Note Attached: Yes ☒ No ☐ N/A ☐
 Waybill Attached: Yes ☒ No ☐
 Shipment Complete: Yes ☒ No ☐ N/A ☒
 QC6 Inspection ☐ N/A ☒
 Work Order ☐ N/A ☒

Discrepancies

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments
11520	601-AD442	200	0	0	200	

Initials of receiver (if shipment OK) Level 12 [Signature]

Production/Admin: 12/5/20
 Date
 Received/Costing
 Initial [Signature]

Location _____



PACKING LIST



PAGE: 1

DATE: 07/24/12

TIME/HEURE: 08:48

EMP#: 22611

ORDER TYPE / TYPE DE COMMANDE: RG

CURRENCY: USD

CUSTOMER P.O.: 17525
BON DE COMMANDESHIP NBR: 324857
No DE EXPEDITEURORDER NUMBER: 0001122204 - 324857
No DE COMMANDEORDER DATE: 07/23/12
DATE DE COMMANDESHIP VIA: FED PLAM - COLLECT
EXPEDIER PARS
O
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032027
DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
CANADAS
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A
DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
CANADAS
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M
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34170
AVIALL TORONTO CSC
1840 ALSTEP DR. UNIT 5.
MISSISSAUGA ON L5S 1W1
CANADA

LINE	MFG	ITEM DESCRIPTION	ORDER QUANTITY QUANTITE COMMANDE	SHIP QUANTITY QUANTITE EXPEDIEE	BACK ORDER COMM. EN SOUF	UOM	LIST PRICE	CUSTOMER PRICE	EXTENDED CUSTOMER PRICE
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PLEASE SHIP FEDEX P1 ON CUSTOMER ACCOUNT
NUMBER 1517-9324-0, AWB# MUST REFERENCE
THE PURCHASE ORDER NUMBER, SHIP TO THE
ATTN OF CHANTAL 613-632-9577

2	28	MS24693C273	200	200		0 EA	.29	.1200	24.00
SCREW: CSK HD, MACHINE, SS									
Schedule B: 7318.15.9000			ECCN: EAR99						

LOT 0312499305 EA
Country of Origin: U.S.A.

PARTS TOTAL	24.00
AOC TOTAL	0.00
TAXES	3.12
FREIGHT	0.00
FUEL SURCHARGE	0.00
ESTIMATED TOTAL	27.12
Currency: United States Dollar	

CERTIFICATE OF CONFORMANCE / CERTIFICAT DE CONFORMITE

I hereby certify that the aircraft parts, appliances and/or aircraft materials described hereon were acquired from a source of supply that is consistent with the conditions under which the department of transport distributor approval number 35-86 has been granted.

Je certifie par la presente que les pieces appareils et/ou materiaux d'avions decrits ci-dessus ont ete acquis d'une source d'approvisionnement consistante avec les conditions sous lesquelles l'approbation du distributeur du departement du transport no. 35-86 ont ete recue.

AV19 R2-99

G.S.T.REG.NO.R121506208

Signed

George D. Pudsev, DSM

Date

07/24/12

DISCOUNT TERMS APPLY ONLY TO SUB TOTAL.
ESCOMPTE APPLIQUES SUR SOUS TOTAL SEULEMENT.
ALL RETURNED MERCHANDISE SUBJECT TO A HANDLING FEE.
FRAIS DE MANUTENTION APPLIQUES SUR TOUTE MARCHANDISE
RETOURNEE.

CUSTOMER COPY / FILE COPY



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO17525

Purchase Order Date 7/23/12

PO Print Date 7/23/12

Page Number 1 of 1

Order From :

VU-AVI003

AVIALL
PO BOX 842267
DALLAS, TX 75284-2267
USA

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

905-676-1695

905-676-9046

Buyer

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

Linda Lacelle

10127-2607

Net 30

USD

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MS20601-AD4W2	Rivet	7/23/12 Yes	250.00 Each		\$0.2000	\$50.00
2	MS24693-C273	Screw	7/23/12 Yes	200.00 ✓ Each		\$0.1200	\$24.00

PO Total:

\$74.00

Change Nbr: 1

Change Date: 7/23/12

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required - YES NO

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Linda Lacelle

From: Laura McClelland <lmcclelland@aviall.com>
Sent: July-23-12 2:32 PM
To: Linda Lacelle
Cc: Brigitte Golden
Subject: Re: rfq

Please see below

17525

Thank you

Laura McClelland
Sr. Customer Service Rep.
Aviall Toronto
Phone: 905-676-1695
Fax: 905-676-9046
Cisco: 843011

As of today, please send quotes and orders to the new email address: toronto@aviall.com

Any Aviall quote, acknowledgement or acceptance of your purchase order is made subject to Aviall's Terms and Conditions of Sale. You agree that Aviall's Terms and Conditions of Sale replace and supersede your proposed terms and conditions for all purposes and your acceptance of such terms is evidenced by you continuing to go forward with this order after receipt of this stamped notice. Go to www.aviall.com and click on Terms & Conditions for a copy of such terms.

From: "Linda Lacelle" <llacelle@dartaero.com>
To: "Laura McClelland" <lmcclelland@aviall.com>
Cc: "Brigitte Golden" <bgolden@dartaero.com>
Date: 07/23/2012 01:54 PM
Subject: rfq

Please advise P % d on:

250 x MS20601-AD4W2	\$0.20 each	stock factory - allow min 5 days
200 x MS24693-C273	sold pkg 100	\$0.12 each 400 Toronto

Thx
L

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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From: (905) 676-1695
TORONTO BRANCH
AVIALL CANADA
1840 ALSTEP DR. UNIT 5

Origin ID: YIBA

FedEx
Express



J11131106060225

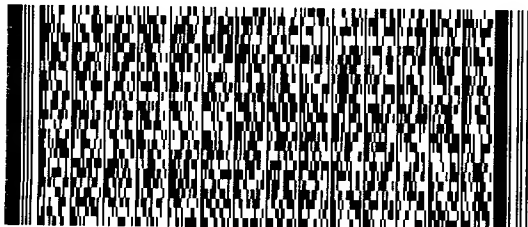
MISSISSAUGA, ON L5S1W1
CA

SHIP TO: (000) 000-0000

BILL RECIPIENT

P.O. 17525
DART AEROSPACE
1270 ABERDEEN ST

HAWKESBURY, ON K6A1K7
CA



Ship Date: 24JUL12
ActWgt: 2.0 LB MAN
CAD: 918055/CAFE2511

Delivery Address Bar Code



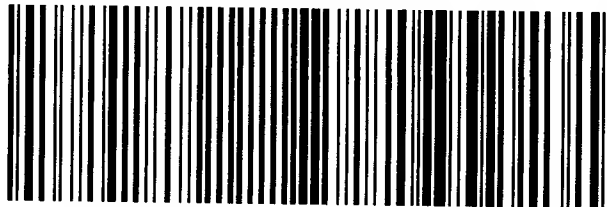
Ref # 324857
Invoice #
PO #
Dept #

WED - 25 JUL PM
PRIORITY OVERNIGHT

TRK# 5311 0918 9982
0451

0B YMXA

K6A 1K7
ON-CA
YMX



50DC1/E052/10BC

After printing this label:

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

Warning: Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing about \$5.00 and with the possibility of a \$100.00 fine.